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|--|---|--|--|---|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2008</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>  |   | Docket Number (Optional)<br>17170/018001                   |  |   |
| Application Number   | 10/558,549-Conf. #5736  | Filed November 29, 2005                                    |  |   |
| For  | DEVICE FOR ANGULARLY POSITIONING A STARTER CYLINDRICAL HEAD WITH RESPECT TO THE SUPPORT THEREOF |  |  |   |
| Art Unit   | 2834  | Examiner N. N. Desai                                       |  |   |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.   |   |  |  |   |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  |   |  |  |   |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))<br><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))<br><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))<br><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))<br><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  |   | <b>Fee</b><br>\$120<br>\$460<br>\$1050<br>\$1640<br>\$2230 | <b>Small Entity Fee</b><br>\$60<br>\$230<br>\$525<br>\$820<br>\$1115 | \$ 120.00<br>\$ _____<br>\$ _____<br>\$ _____<br>\$ _____ |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.<br><input type="checkbox"/> A check in the amount of the fee is enclosed.<br><input checked="" type="checkbox"/> Payment by credit card.<br><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.<br><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to<br>Deposit Account Number <u>50-0591</u> . |   |  |  |   |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.   |   |  |  |   |
| I am the <input type="checkbox"/> applicant/inventor.<br><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).<br><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>33,986</u><br><input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 <u>_____</u>  |   |  |  |   |
| <u>/Jonathan P. Osha/</u>  |   | April 14, 2008   |  |   |
| Signature  |   | Date   |  |   |
| <u>Jonathan P. Osha</u>  |   | (713) 228-8600   |  |   |
| Typed or printed name  |   | Telephone Number   |  |   |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  |   |  |  |   |
| <input type="checkbox"/>   | Total of <u>1</u> forms are submitted.  |  |  |   |